

November 30, 1954

DR. E. C. HAMMOND AND DR. E. L. WYNDER

At a meeting held on the afternoon of Wednesday, November 17th, in the auditorium of Memorial Hospital in New York, Drs. Hammond and Wynder delivered their routine comments to the effect that cigarettes are proven to be the cause of lung cancer. The meeting was attended by staff members and personnel of the hospital. I attended with Dr. McKeen Cattell (Professor of Pharmacology, Cornell Medical School) and Miss Mary MacDonald (Statistician, Memorial Hospital). The following comments on the presentation may be of some interest in the event that either Hammond or Wynder appear as witnesses.

Dr. Fred Stewart (Pathologist) conducted the meeting and expressed his opinion that he did not agree with the speakers. He stated that his disagreement was based on the fact that if lung cancer was caused by an inhaled carcinogen which reaches many sections of the lung tissue, he could not understand why the so-called bronchiogenic cancer always appears as a small single growth. It is his belief that there should be multiple lesions in the lung tissue if cigarette smoke was carcinogenic.

Dr. McKeen Cattell, commenting upon Dr. Hammond's statements in connection with heart effects, asked Dr. Hammond if he had smoking histories immediately before or at the time of death of the men that he studied, because there are no known chronic or cumulative effects of nicotine shown by any study of nicotine effects in many various species of animals. Since there are no cumulative effects then it is an assumption of association on the part of Dr. Hammond not supported by the logic of pharmacology that a chronic effect of nicotine would be the cause of death when according to all of the logic an acute effect must be shown. Dr. Hammond was completely dismayed by this question and had no answer except that they would consider attempting to get information as to the smoking history at the time of death.

A staff member whom I do not know and who was not known to Dr. Cattell asked if they were taking current smoking histories to learn what effect, if any, the recent publicity on the study had had upon the smoking habits of the individuals in the survey. Dr. Hammond evaded this question and because of his evasion we thought that he had not previously considered it.

Another staff member asked Dr. Wynder why the statistics on human mortality due to lung cancer showed a clearcut male-female sex ratio of approximately 4 males to 1 female, and in his experiments on painting tars on mice there were more mouse skin cancers in the female group than in the male group. Dr. Wynder had no explanation for this.

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Another young staff member asked for an explanation on geographic differences between countries in incidence of lung cancer, and this was completely evaded by Dr. Hammond with the statement that the statistics in other countries were probably not as reliable as those in the United States.

On the whole, it was the opinion of the writer that the audience was rather bored with the fact that Wynder and Hammond were presenting the same old stuff in the same old way, and they were skeptical as to the validity of the material.

A. Grant Clarke

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